

PUBLIC PROTECTION CABINET Department of Housing, Buildings and Construction

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Cooking Disclosure Form

I	including all employees will not g includes any stove top, hot plate frying or deep	C I
grease facen vapors. This cookin	g merudes any stove top, not place frying of deep	, irying,
1 1	hat evidence exists that indicates cooking that pre- te hood with a suppression system. In lieu of the s shall cease and decease.	
	Owner in responsible charge	(Date)
	Authority having Jurisdiction	(Date)